

## Application or Doctor Number

Substitute for Form PTP-873

09726 072

(Column 1) (Column 2)

SMALL ENTITY	
RATE	FEE
	\$ _____
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
<b>TOTAL</b>	

OR . OTHER THAN  
SMALL ENTITY

RATE	FEE
	\$ _____
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
<b>TOTAL</b>	

\* If the difference in column 1 is less than zero, enter "0" in column 2.

(Column 1)	(Column 2)	(Column 3)
1	2	3
4	5	6
7	8	9
10	11	12
13	14	15
16	17	18
19	20	21
22	23	24
25	26	27
28	29	30
31	32	33
34	35	36
37	38	39
40	41	42
43	44	45
46	47	48
49	50	51
52	53	54
55	56	57
58	59	60
61	62	63
64	65	66
67	68	69
70	71	72
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364	365	366
3		

SMALL ENTITY	
RATE	ADDITIONAL FEE
X \$ 25.00	
X \$ 700.00	
+ \$ .00	
TOTAL ADDL FEE	

**OR OTHER THAN  
SMALL ENTITY**

RATE	ADDITIONAL FEE
x 3 <u>10</u>	
x 2 <u>100</u>	
+ 5 =	
TOTAL ADDL FEE	

RATE	ADDITIONAL FEE
25	
100	
48	
TOTAL ADDL FEE	

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RATE	ADDITIONAL FEE
XS 50	0
XS 200	0
XS	0
TOTAL ADDITIONAL FEE	0

RATE	ADDITIONAL FEE
X 25	
X 100	
X 3	
TOTAL ADD'L FEE	

	RATE	ADD
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100		

UNIT	MONTHLY ADDITIONAL FEE
x \$ 52	
x \$ 200	
♦ \$ .	
TOTAL ADDITIONAL FEE	

- If the entry in column 1 is less than the entry in column 2, write  $\frac{1}{2}$  in column 3.

**"If the Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".**

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

**The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.**

This collection of information is required by 37 CFR 1.18. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22303-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioners for Patents, P.O. Box 1450, Alexandria, VA 22303-1450.

**If you need assistance in completing the form, call 1-800-870-9199 and select option 2.**